

DECLARATION FOR PATENT APPLICATION/POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name. I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COLLAPSIBLE HANDRAIL MECHANISM

the specification of which is filed herewith.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by the Amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefit(s) under Title 35, United States Code § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application(s) for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN APPLICATION(S)			Priority Claimed	
Application Number	Country	Day/Month/Year Filed	Yes	No
2002951228	Australia	06/09/2002	Yes	
2003204435	Australia	30/05/2003	Yes	

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s) or PCT international application(s) designating the United States of America listed below and insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

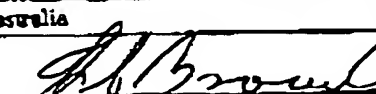
Application Number	Filing Date	Status: Patented, Pending or Abandoned

POWER OF ATTORNEY: As a named inventor, I (we) hereby appoint:
VOLPE AND KOENIG, P.C.

Customer Number 3624

as my/our attorney(s) or agent(s), with full power of substitution and revocation, to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Sole or First Inventor: Kerry Charles BROAD	
Residence: 55 Malonga Drive, Burnie, Tasmania 7320, Australia	
Mailing Address: 55 Malonga Drive, Burnie, Tasmania 7320, Australia	
Country: Australia	Citizenship: Australian
Inventor's Signature: 	Date: September 5, 2003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the **PATENT APPLICATION** of:

Kerry Charles Broad

Application No.: Not Yet Known

Confirmation No.: Not Yet Known

Filed: Not Yet Known

For: COLLAPSIBLE HANDRAIL MECHANISM

Group: Not Yet Known

Examiner: Not Yet Known

Our File: PIP-PT033

Date: September 5, 2003

ASSOCIATE POWER OF ATTORNEY

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
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Sir:

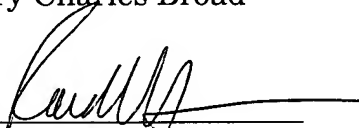
Pursuant to 37 C.F.R. §1.34, please recognize as associate attorneys or agents in this application the registered attorneys and agents associated with Volpe and Koenig, P.C., Customer No. 3624.

The power to the undersigned appears in the original application papers.

Respectfully submitted,

Kerry Charles Broad

By


Randolph J. Huis
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RJH/rw

CORRESPONDENCE ADDRESS INDICATION FORM

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☐ Request for Customer Number (PTO/SB/125) submitted herewith.

in the following listed application(s) or patent(s):

Patent Number (if appropriate)	Application Number	Patent Date (if appropriate)	U.S. Filing Date

Typed or Printed Name	Randolph J. Huis Volpe and Koenig, P.C.,		<p>(check one)</p> <p><input type="checkbox"/> Applicant or Patentee</p> <p><input type="checkbox"/> Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> Attorney or Agent of record</p> <p>34,626 (Reg. No.)</p>
Signature			
Date	9-5-2003	Telephone 215-568-6400	
Address of signer: United Plaza, Suite 1600 30 South 17th Street Philadelphia, PA 19103			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below *.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.